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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/733,345

12/12/2003

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P1977US00

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01/21/2010

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CANADA

EXAMINER

ALTSCHUL, AMBER L

ART UNIT

PAPER NUMBER

3686

MAIL DATE

DELIVERY MODE

01/21/2010

PAPER

**Please find below and/or attached an Office communication concerning this application or proceeding.**

The time period for reply, if any, is set in the attached communication.

<b>Office Action Summary</b>	<b>Application No.</b> 10/733,345	<b>Applicant(s)</b> PRISTINE, GORSEV	
	<b>Examiner</b> AMBER L. ALTSCHUL	<b>Art Unit</b> 3686	

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

### Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

### Status

- 1) ☒ Responsive to communication(s) filed on 08 October 2009.
- 2a) ☒ This action is **FINAL**.                      2b) ☐ This action is non-final.
- 3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

### Disposition of Claims

- 4) ☒ Claim(s) 1-18 is/are pending in the application.
- 4a) Of the above claim(s) \_\_\_\_\_ is/are withdrawn from consideration.
- 5) ☐ Claim(s) \_\_\_\_\_ is/are allowed.
- 6) ☒ Claim(s) 1-18 is/are rejected.
- 7) ☐ Claim(s) \_\_\_\_\_ is/are objected to.
- 8) ☐ Claim(s) \_\_\_\_\_ are subject to restriction and/or election requirement.

### Application Papers

- 9) ☐ The specification is objected to by the Examiner.
- 10) ☐ The drawing(s) filed on \_\_\_\_\_ is/are: a) ☐ accepted or b) ☐ objected to by the Examiner.  
Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).  
Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
- 11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

### Priority under 35 U.S.C. § 119

- 12) ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
- a) ☐ All    b) ☐ Some \*    c) ☐ None of:
1. ☐ Certified copies of the priority documents have been received.
  2. ☐ Certified copies of the priority documents have been received in Application No. \_\_\_\_\_.
  3. ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

\* See the attached detailed Office action for a list of the certified copies not received.

### Attachment(s)

- |   |   |
|---|---|
| 1) <input type="checkbox"/> Notice of References Cited (PTO-892)                    | 4) <input type="checkbox"/> Interview Summary (PTO-413)           |
| 2) <input type="checkbox"/> Notice of Draftperson's Patent Drawing Review (PTO-948) | Paper No(s)/Mail Date. _____                                      |
| 3) <input type="checkbox"/> Information Disclosure Statement(s) (PTO/SB/08)         | 5) <input type="checkbox"/> Notice of Informal Patent Application |
| Paper No(s)/Mail Date _____   | 6) <input type="checkbox"/> Other: _____                          |

## **DETAILED ACTION**

### ***Response to Amendment***

1. This communication is in response to the amendment filed on October 8, 2009. Claims 1-18 are pending in this present application. Claim 12 has been amended.

### ***Claim Rejections - 35 USC § 103***

2. The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negated by the manner in which the invention was made.

3. Claims 1-18 are rejected under 35 U.S.C. 103(a) as being unpatentable over United States Patent Application Publication Number US 2002/0077865, Sullivan, et al., hereinafter Sullivan, in view of United States Patent Number US 6,151,581, Kraftson, et al., hereinafter Kraftson.

4. (Previously Presented) Regarding claim 1, Sullivan teaches a computing device for location proximal to a waiting area of a hospital emergency room and for intake of a patient in said hospital emergency room comprising:

a touch-screen operable to receive input by allowing said patient to depress active portions along the surface of said touch-screen, said touch screen further operable to display information to said patient, (page 3, para. 66);

said computing device further comprising a set of headphones connected to said computing device for presenting audio output to said patient, (page 5, para. 85); and

wherein said computing device is configured to receive an identification of said patient and a preferred language of said patient, and further operable to present on said touch screen at least one main question and a plurality of dependent questions presented based on a response to said main question and responses to previous dependent questions, said questions presented in said preferred language of said patient, said questions pertaining to an intake procedure of said patient to said hospital, said device further operable to receive responses to each of said of said questions by touch screen input from said patient, said device further operable to generate an intake report based on said responses in a preferred language of a hospital staff member responsible for further processing of said intake of said patient, (abstract, page 8, para. 125).

Sullivan does not explicitly teach a plurality of dependent questions based on a response to said main question and responses to previous dependent questions. However, Kraftson teaches a plurality of dependent questions based on a response to said main question and responses to previous dependent questions, (column 6, lines 19-31). It would have been obvious to one of ordinary skill in the art to combine Sullivan and Kraftson. The motivation would have been to provide the most effective treatment for a disease or patient problem. (Kraftson, col. 1, lines 41-57).

5. (original) Regarding claim 2, Sullivan teaches the device of claim 1 as described above. Sullivan further teaches wherein said computing device is attachable to a printing device local to

said computing device and wherein said report is generated at said printing device, (page 8, para. 125).

6. (original) Regarding claim 3, Sullivan teaches the device of claim 1 as described above. Sullivan further teaches wherein said computing device is connected to an intake server via a network, and wherein said report is delivered to said intake server, (page 4, para. 75).

7. (original) Regarding claim 4, Sullivan teaches the device of claims 1 and 3 as described above. Sullivan further teaches wherein said intake server is attachable to a printing device local to said intake server and wherein said report is generated at said printing device, (page 9, para. 134).

8. (original) Regarding claim 5, Sullivan teaches the device of claims 1 and 3 as described above. Sullivan further teaches wherein said intake server is connected to a plurality of treatment room client computing devices via said network, and wherein said treatment room clients include an output device, (page 7, para. 114).

9. (original) Regarding claim 6, Sullivan teaches the device of claim 1 as described above. Sullivan further teaches wherein said device is mounted within the housing of a Kiosk, (page 3, para. 66).

10. (original) Regarding claim 7, Sullivan teaches the device of claim 1 as described above. Sullivan further teaches wherein said device is a stand-alone personal computer, (page 4, para. 78).

11. (previously presented) Regarding claim 8, Sullivan teaches in a computing device for location proximal to a waiting area of a hospital emergency room comprising a touch-screen

operable to receive input by allowing depression of active portions along the surface of said touch-screen, said touch screen further operable to display information, a method for intake of a patient in said hospital emergency room, (page 3, para. 66), comprising the steps of:

receiving input from said touch screen representing a preferred language of said patient, (abstract, page 8, para. 125);

receiving input from said touch screen representing an identification of said patient, (abstract, page 8, para. 125);

presenting an intake question to said patient on said touch-screen, (pages 3-4, para. 67);

receiving response input from said touch screen representing a responses to said intake questions, (pages 3-4, para. 67). Sullivan does not explicitly teach repeating said representing and said receiving response input steps based on responses to previous intake questions. However, Kraftson teaches repeating said representing and said receiving response input steps based on responses to previous intake questions, (column 6, lines 19-31). It would have been obvious to one of ordinary skill in the art to combine Sullivan and Kraftson. The motivation would have been to provide the most effective treatment for a disease or patient problem. (Kraftson, col. 1, lines 41-57);

repeating said presenting and said receiving response input steps based on responses to previous intake questions until a desired number of intake question responses have been received, (pages 3-4, para. 67). Sullivan does not explicitly teach repeating said representing and said receiving response input steps based on responses to previous intake questions. However, Kraftson teaches repeating said representing and said

receiving response input steps based on responses to previous intake questions, (column 6, lines 19-31). It would have been obvious to one of ordinary skill in the art to combine Sullivan and Kraftson. The motivation would have been to provide the most effective treatment for a disease or patient problem. (Kraftson, col. 1, lines 41-57); and generating an intake report in a preferred language of a hospital staff member responsible for further intake of said patient, (abstract, page 8, para. 125).

12. (original) Regarding claim 9, Sullivan teaches the method of claim 8 as described above. Sullivan further teaches wherein said computing device is attachable to a printing device local to said computing device and wherein said report is generated at said printing device, (page 9, para. 134).

13. (original) Regarding claim 10, Sullivan teaches the method of claim 8 as described above. Sullivan further teaches wherein said computing device is connected to an intake server via a network, and wherein said report is delivered to said intake server, (page 4, para. 75).

14. (original) Regarding claim 11, Sullivan teaches the method of claims 8 and 10 as described above. Sullivan further teaches wherein said intake server is attachable to a printing device local to said intake server and wherein said report is generated at said printing device, (page 9, para. 134).

15. (currently amended) Regarding claim 12, Sullivan teaches the method of claims 8 and 10 as described above. Sullivan further teaches wherein said intake server is connected to a plurality of treatment room client computing devices via said network, and wherein said treatment room clients include an output device, said intake server operable to determine an

available one of said treatment rooms and to direct said report to said treatment room client computing device respective to said available one, (page 7, para. 114).

16. (original) Regarding claim 13, Sullivan teaches the method of claim 8 as described above. Sullivan further teaches wherein said computing device is mounted within the housing of a kiosk, (page 3, para. 66).

17. (original) Regarding claim 14, Sullivan teaches the method of claim 8 as described above. Sullivan further teaches wherein said computing device is a stand-alone personal computer, (page 4, para. 78).

18. (previously presented) Regarding claim 15, Sullivan teaches a computer readable media for storing programming instructions for use with a computing device for location proximal to a waiting area of a hospital emergency room comprising a touch-screen operable to receive input by allowing depression of active portions along the surface of said touch-screen, said touch screen further operable to display information, and a method for intake of a patient in said hospital emergency room, (page 3, para. 66), comprising the steps of:

receiving input from said touch screen representing a preferred language of said patient,

(abstract, page 8, para. 125);

receiving input from said touch screen representing an identification of said patient,

(abstract, page 8, para. 125);

presenting an intake question to said patient on said touch-screen, (pages 3-4, para. 67);

receiving response input from said touch screen representing a responses to said intake questions, (pages 3-4, para. 67);



repeating said presenting and said receiving response input steps based on responses to previous intake questions until a desired number of intake question responses have been received, (pages 3-4, para. 67); and  
generating an intake report in a preferred language of a hospital staff member responsible for further intake of said patient, (abstract, page 8, para. 125).

Claim 15 is rejected for the same reasons as set forth in claims 1 and 8 above.

19. (previously presented) Regarding claim 16, Sullivan teaches a system for intake of a patient in said hospital emergency room comprising at least one computing device associated with a waiting area of a hospital emergency room, (page 7, para. 114), and a comprising:

a touch-screen operable to receive input by allowing said patient to depress active portions along the surface of said touch-screen, said touch screen further operable to display information to said patient, (page 3, para. 66);

said computing device further comprising a set of headphones connected to said computing device for presenting audio output to said patient, (page 5, para. 85);

and wherein said computing device is configured to receive an identification of said patient and a preferred language of said patient, and further operable to present on said touch screen at least one main question and a plurality of dependent questions presented based on a response to said main question and responses to previous dependent questions, said questions presented in said preferred language of said patient, said questions pertaining to an intake procedure of said patient to said hospital, said computing device further operable to receive responses to each of said questions by touch screen input from said patient, said computing

device further operable to generate an intake report based on said responses in a preferred language of a hospital staff member responsible for further processing of said intake of said patient, (abstract, page 8, para. 125);

said system further comprising an intake server for connection to said computing devices and for receiving intake reports generated thereby, (page 4, para. 75);

said system further comprising a plurality of treatment room clients connected to said intake server, said treatment room clients including an output device operable to present said intake reports, (page 4, para. 75 and page 8, para. 125);

said server operable to direct said intake reports to an appropriate one of said treatment room clients according to a prioritization criteria, (page 7, para. 117).

20. (original) Regarding claim 17, Sullivan system the method of claim 16 as described above. Sullivan further teaches wherein said device is a kiosk located in said waiting room, (page 3, para. 66).

21. (original) Regarding claim 18, Sullivan system the method of claim 16 as described above. Sullivan further teaches wherein said device is a wireless portable computing device operable to connect with said server via a wireless network such that a patient en route to said hospital can complete at least some of said questions prior to arrival at said hospital, (page 4, paragraphs 72 and 75).

***Response to Arguments***

22. Applicant's arguments filed October 8, 2009 have been fully considered but they are not persuasive. Applicant's arguments will be addressed hereinbelow in the order in which they appear in the response filed October 8, 2009.

(A) At pages 8-10 of the October 8, 2009 response, Applicant argues that Sullivan in combination of Kraftson fails to disclose "questions based on responses to any other questions.

In response, the Examiner respectfully disagrees. It is readily apparent that Sullivan in combination with Kraftson discloses "questions based on responses to any other questions", (See Kraftson, column 22, lines 42-58). Thus, the Examiner respectfully contends that Kraftson's system that determines a survey question to ask based on a yes/no response is an art recognized equivalent to applicant's said computing device for receiving patient information and responses.

(B) At page 11 of the October 8, 2009 response, Applicant argues that Sullivan fails to disclose "said device further operable to generate an intake report based on said responses in a preferred language of a hospital staff member responsible for further processing of said intake of said patient".

In response, the Examiner respectfully disagrees. It is readily apparent that Sullivan teaches said device further operable to generate an intake report based on said responses in a preferred language of a hospital staff member responsible for further processing of said intake of said patient, (See Sullivan, abstract, paragraphs 125 and 132-134). Thus, the Examiner respectfully contends that Sullivan's templates containing fields into which data may be entered is an art recognized equivalent to applicant's preferred intake reports.

(C) At page 11 of the October 8, 2009 response, Applicant asserts that Claims 8, 15, and 16 are patentable because they contain similar elements to those of claim 1 and that all remaining claims that are dependent from Applicant's independent claim 1 are patentable and requests that the rejection of these claims be withdrawn. Examiner respectfully disagrees and reiterates the rejections of claim 2-18 as noted by the citations above. As such, Applicant's remarks with regard to the application of Sullivan in combination with Kraftson to these claims are moot in the above Office Action.

23. Applicant's arguments with respect to claims 1-18 have been considered but are moot in view of the new ground(s) of rejection.

***Conclusion***

24. The prior art made of record and not relied upon is considered pertinent to applicant's disclosure.

25. Applicant's amendment necessitated the new ground(s) of rejection presented in this Office action. Accordingly, **THIS ACTION IS MADE FINAL**. See MPEP § 706.07(a). Applicant is reminded of the extension of time policy as set forth in 37 CFR 1.136(a).

A shortened statutory period for reply to this final action is set to expire THREE MONTHS from the mailing date of this action. In the event a first reply is filed within TWO MONTHS of the mailing date of this final action and the advisory action is not mailed until after the end of the THREE-MONTH shortened statutory period, then the shortened statutory period will expire on the date the advisory action is mailed, and any extension fee pursuant to 37 CFR 1.136(a) will be calculated from the mailing date of the advisory action. In no event, however, will the statutory period for reply expire later than SIX MONTHS from the date of this final action.

26. Any inquiry concerning this communication or earlier communications from the examiner should be directed to Amber L. Altschul whose telephone number is (571) 270-1362. The examiner can normally be reached on M-Th 7:30-5, F 7:30-4, every other Friday off.

27. If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Gerald J. O'Connor can be reached at (571) 272-6787. The fax phone numbers for the organization where this application or proceeding is assigned are (571) 273-8300.

28. Any inquiry of a general nature or relating to the status of this application or proceeding should be directed to the receptionist whose telephone number is (571) 272-8219.

29. Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or (571) 272-1000.

/A. L. A./

Examiner, Art Unit 3686

January 12, 2009

/Gerald J. O'Connor/  
Supervisory Patent Examiner  
Group Art Unit 3686